4031230804

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

2014 APR 24 AM 11: 56

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1.	COMMIT	OF ITEE (in full)	TYPE OR	PRINT` ▼		ample: If typi or the lines.	ng, type	12FE4M5		
L	UR	BAN, PR	DERE	ss po	LITTER	4 ACT	που, ζ	p.M.M.	TRE	
L							1111			
ADE	DAESS (r	number and street)	P.C). Bo	x,2,5	7	1111			
	thar	eck if different n previously orted. (ACC)	WA	LTER	BORD,	1 1 1 1		ISCI I	29488	
2.	FEC ID	ENTIFICATION N	UMBER.		CITY ▲			STATE A	ZIP CO	DDE 🛦
	CO	0.5286	61		3. IS THIS REPORT	12.0.4	NEW (N) OR	AN (A)	IENDED	
4.	TYPE (Choose	OF REPORT One)	. (b) Mor Rep	7 74 71	Feb 20 (M2)	<u> </u>	May 20 (M5)	E41	20 (M8)	Nov 20 (M11) (Non-Election Year Only)
	(a) Qua	arterly Reports:		E 1	Mar 20 (M3)		Jun 20 (M6)	arm.	20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	V	April 15 Quarterly Report (01)		Apr 20 (M4)		Jul 20 (M7)	Oct	20 (M10)	Jan 31 (YE)
		July 15 Quarterly Report ((C)	12-Day PRE-Election	n []	Primary (12l	lbu. rgtu	General	(12G)	Runoff (12R)
		October 15 Quarterly Report (Report for t	he:	Convention	(12C)	Special (128)	
		January 31 Year-End Report (E	Election on	M c M	D' 0 /	Y	In the State	of
		July 31 Mid-Year Report (Non-election Year Only) (MY)	on (d)	30-Day	£	General (30	G) [[Runoff (3	30R)	Special (30S)
		Termination Report (TER)	t	Report for t	ne: Election on	M /		Y	State	of E
5.	Covering	Period O	M / D	1 2C	214	through	0,3	31	2014	* P
l ce	rtify that	I have examined t	his Report a	and to the be	est of my kno	wiedge and	belief it is tru	e, correct and	d complete.	
		Name of Treasure	_	~ .	ET L.	_				
Sigr	nature of	Treasurer ¥	Brid	gete	Mw	Lay		ate 64	F' 1 0'	2014
NOT	TE: Submi	ission of false, error	$\mathcal C$ neous, or inc	omplete infor	mation may s	ubject the per	son signing th	is Report to th	ne penalties of 2	U.S.C. §437g.
<u> </u>	∫ U	fice se							FEC FOI Rev. 12/	

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SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)	OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name URBAN PROGRESS	POLITICAL ACTION CON	umiTTEE
Report Covering the Period: From:	0/ 01 2014 T	· 03'31'2014
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1,		
(b) Cash on Hand at Beginning of Reporting Period		
(c) Total Receipts (from Line 19)		0.000
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		0000
7. Total Disbursements (from Line 31)	00.00	0000
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		
This committee has qualified as a mul	Iticandidate committee. (see FEC FORM 1M)	· · · · · · · · · · · · · · · · · · ·
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530 Local 202-694-1100	• •

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DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

URBAN PROGRESS POLITICAL ACTION COMMITTEE

	eport Covering the Period: From: U	COLUMN A	COLUMN B
	i. neceipis	Total This Period	Calendar Year-to-Date
11.	Contributions (other than luans) From:		
	(a) Individuals/Persons Other		
	Than Political Committees	0000	$\Delta\Delta\Delta\Delta$
	(i) Itemized (use Schedule A)		
	(ii) Unitemized	00.00	0000
	(iii) TOTAL (add		
	Lines 11(a)(i) and (ii)▶	00.00	0000
	(b) Political Party Committees	, 0000	
	(c) Other Political Committees	\sim	\sim
	(such as PACs)	5000	
	(d) Total Contributions (add Lines		
	11(a)(iii), (b), and (c)) (Carry	0000	0000
10	Totals to Line 33, page 5) Transfers From Affiliated/Other		
12.	Party Committees	0000	0000
	· , · · · · · · · · · · · · · ·		
13.	All Loans Received	0000	
		Property and the second of the	and the second s
14.	Loan Repayments Received	0000	0000
15.	Offsets To Operating Expenditures	Reguesilement over 2 State Linearity on 12 by railing and hemost Linearity and h	thundle of head thurshood and continued to the Country of the continued to
	(Refunds, Rebates, etc.)		
	(Carry Totals to Line 37, page 5)	0000	
16.	Refunds of Contributions Made		
	to Federal Candidates and Other Political Committees	$\Delta \Delta \Delta \Delta \Delta$	
17	Other Federal Receipts		
•••	(Dividends, Interest, etc.)	0000	0000
18.	Transfers from Non-Federal and Levin Funds	المسيد المسترك المسترك المسترك والمسترك المسترك المسترك المسترك المسترك المسترك المسترك المسترك المسترك المسترك	the started of the second
	(a) Non-Federal Account		
•	(from Schedule H3)	0000	
	•		
	(b) Levin Funds (from Schedule H5)	$\mathcal{L}_{\mathcal{L}}}}}}}}}}$	
	(c) Total Transfers (add 18(a) and 18(b))		
19.	Total Receipts (add Lines 11(d),		
	12, 13, 14, 15, 16, 17, and 18(c))▶		
20	Total Federal Receipts	principal and commencer control of the company of the company of the commencer control of the control of the company of the co	and the second of the first second of the
۵.	(subtract Line 18(c) from Line 19)	0000	COO
	(1111 200 100 100)	Line in the state of the state	(h-5-5-2)-1-5-2)-1-5-1-5-1-5-1-5-1-5-1-5-1-5-1-5-1-5-1-

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal	iour ms renou	Calendar Year-10-Date
	Activity (from Schedule H4)		
	(i) Federal Share		
	(ii) Non-Federal Share	0000	0,000
	(b) Other Federal Operating		
	Expenditures(c) Total Operating Expenditures	0000	
	(add 21(a)(i), (a)(ii), and (b))	0000	0000
22.	Transfers to Affiliated/Other Party		
23.	CommitteesContributions to		
	Federal Candidates/Committees and Other Political Committees	0000	0000
24.	Independent Expenditures		
25.	(use Schedule E)	00.00	
	(2 U.S.C. §441a(d)) (use Schedule F)	0000	0000
26.	Loan Repayments Made		
27.	Loans Made	0,000	0000
28.	Refunds of Contributions To: (a) Individuats/Persons Other		
	Than Political Committees		
	(b) Political Party Committees	0,000	0000
	(c) Other Political Committees		
	(such as PACs)		
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	<u> </u>	
29	Other Disbursements	0000	0000
_0.			
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	00.00	0000
		0000	Ω
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely		
	With Federal Funds	0.000	
	(c) Total Federal Election Activity (add		0000
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶		
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	0000	0000
32	Total Federal Disbursements	Transport of the second	
J	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	0000	$\mathcal{O}(\mathcal{O})$

DETAILED SUMMARY PAGE

of Disbursements

FEC. Form 3X (Rev. 02/2003) Page 5 **COLUMN A** COLUMN B III. Net Contributions/Operating Ex-**Total This Period** penditures Calendar Year-to-Date 33. Total Contributions (other than loans) 0000 (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (frem Line 15, page 3)..... 38. Net Operating Expenditures (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE OF Use separate schedule(s) (check only one) **ITEMIZED RECEIPTS** for each category of the 11a 11b 11c 12 **Detailed Summary Page** Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial numbers, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) ROGRESS POLITICAL ACTION COMMITTEE Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period =7==7= _____ FEÇ ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ General **Primary** Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt **Mailing Address** City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ **Primary** General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City Zip Code State Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ General Primary Other (specify) SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)......

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER:			
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only one) 21b 22 23	24 25 26		
		27 28a 28b	28c 29 30b		
Any information copied from such Reports and Statem or for commercial oursoes, other than using the name	nents may not be sold or used e and address of any political	ly any person for the purpose of committee to solicit contributions from	soliciting contributions om.such committee.		
NAME OF COMMITTEE (In Fuli)					
URBAN PROGRESS PO	LITICAL ACTION	CommiTTEE			
Full Name (Last, First, Middle Initial) A.		Date of Disburseme	ent		
Mailing Address		M T M / D 0 D	/		
City	State Zip Code				
Purpose of Disbursement		11 1	sbursement this Period		
Candidate Name		ategory/			
	Primary General		and the state of t		
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)		B			
B		Date of Disburseme	ent . / Y b Y v Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address					
City	State Zip Code		_		
Purpose of Disbursement		Amount of Each Di	sbursement this Period		
Candidate Name		ategory/	soursement this Period		
	nent For: Primary General Other (specify)	Emmand of conditions of A long Classic			
State: District:					
Full Name (Last, First, Middle Initial) C.		Date of Disbursem	ent ¶ / {{\picketententent}}		
Mailing Address			1 1		
City	State Zip Code				
Purpose of Disbursement		Amount of Each Di	sbursement this Period		
Candidate Name		ategory/			
	nent For: Primary General Other (specify)	The second secon	A Annual Commence of the Comme		
- Districts					
SUBTOTAL of Disbursements This Page (optional)			0000		
TOTAL This Period (last page this line number only).			$\mathcal{L}_{\mathcal{O}}$		

SCHEDULE C (FEC Form 3X)

OANS (Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE 13 OF FORM 3X
NAME OF COMMITTEE (In Full)	
URBAN PROGRESS POLITICAL ACT	TON COMMITTEE
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election: Primary General
Mailing Address	Other (specify)
City State ZIP Cod	e
Original Amount of Loan Cumulative Payment To I	
TERMS Date Incurred Date Due	Interest Rate Secured:
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)	Name of Employee
1. Full Name (Last, First, Milddle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If n	oo Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule C

Federal Election Commission, Washington, D.C. 20463					
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER			
URBAN PROGRESS POLITICAL	ACTOON COMMITTE	E C00528661			
LENDING INSTITUTION (LENDER)	Amount of Loan	Interest Rate (APR)			
Full Name	Rearing samplement come to constitute at the contraction of				
	ن سالسندگر ما سباک در و ماکندگرین ا	<u></u> %			
Mailing Address		MTM7/DTD7/YTYTY			
	Date Incurred or Established	. We shall be tal			
		- Mary Part Part			
City State Zip Code	Date Due				
A. Has loan been restructured? No Yes	If yes, date originally incurre	d , o o , y y y y			
B. If line of credit,	Total				
	Comming	the constitution of property and the confidence of the constitution of the constitution of the constitution of			
Amount of this Draw:	Balance:	The state of the s			
time to the state of the state					
C. Are other parties secondarily liable for the debt incurred No Yes (Endorsers and guarantors mu	ed? ust be reported on Schedule C.)				
D. Are any of the following pledged as collateral for the l	loan: real estate, personal	What is the value of this collateral?			
property, goods, negotiable instruments, certificatos of		Browell sursidio out formit more remitted at four editional funite framed			
stocks, accounts receivable, cash on deposit, or other					
		kreathracha ville milionale na il limbio er konstituende er di			
No Yes If yes, specify:		Com the leader have a newtested consult.			
		Does the lender have a perfected security			
		interest in it? No Yes			
E. Are any future contributions or future receipts of interes		What is the estimated value?			
collateral for the loan? No Yes If yes, s	specify:	Manaell : a also conformation refer to firmula providing of our filter rate			
		Martine Seal De Cardine Berlin Santillar Sant			
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:				
Date account established:	Address:				
Many , Toron , TVTY TYTY					
	City, State, Zip:				
Amelian Bassan hardens					
F. If neither of the types of collateral described above wa the loan amount, state the basis upon which this loan					
G. COMMITTEE TREASURER		DATE			
		DATE			
Typed Name		- Smake Versell Versels			
Signature		Exemplared Secretarial Exemplar in Superfaction			
H. Attach a signed copy of the loan agreement.					
I. TO BE SIGNED BY THE LENDING INSTITUTION:					
I. To the best of this institution's knowledge, the te	rms of the loan and other infor	mation regarding the extension of the loan			
are accurate as stated above.					
II. The loan was made on terms and conditions (in	cluding interest rate) no more fa	avorable at the time than those imposed for			
similar extensions of credit to other borrowers of comparable credit worthiness.					
III. This institution is aware of the requirement that a complied with the requirements set forth at 11 C	a loan must be made on a basi	is writen assures repayment, and has			
AUTHORIZED REPRESENTATIVE	FR 100.02 and 100.142 iii mak				
		DATE			
Typed Name					
Signature Tit	le				
		Breithead Castass Circlassifications			

SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

E

(Use separate schedule(s)

PAGE FOR LINE NUMBER:

ХC	luding Loans			eacn ered line)	(cneck only one)	10
NA	ME OF COMMITTEE (In Full)				 	
		LITTCAL ACTION CO				
	A. Full Name (Last, First, Middle Initial) of Debt	or or Creditor	1	Nature of Debt (Purpose):		
Ì	Mailing Address					
	City State	Zip Code				
Ì	Outstanding Balance Beginning This Period	· · · · · · · · · · · · · · · · · · ·			•	
ı		•				
1	Amount Incurred This Period	Payment This Period			ng Balance at Close	
				Ĭ		
	B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		Nature of D	ebt (Purpose):	
		·				
Ī	Mailing Address					
-	City State	Zip Code				
	Outstanding Balance Beginning This Period Amount Incurred This Period	Payment This Period			ng Balance at Close	4:-:-:
	C. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		Nature of D	ebt (Purpose):	
ł	Mailing Address	 	-			
١	•					
	City	State Zip Code				
	Outstanding Balance Beginning This Period					
	Amount Incurred This Period	Payment This Period			ng Balance at Close	
				1-1-		<u></u>
1)	SUBTOTALS This Period This Page (optional)		>			000
2)	TOTALS This Period (last page this line number	r only)	▶		`,``_`,` <i>`</i>	000
3)	TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	>			000
4١	ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page or	ılv\ ►			2000

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES	PAGE OF FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (in Full)	DENTIFICATION NUMBER V
URBAN PRESS POLITICAL ACTION COMMITTEE CO	00528661
1	ic Distribution/Dissemination
Mailing Address Amount	
City State Zip Code	
Purpose of Expenditure Category/ Type Date of Disb	ursement or Obligation
Name of Federal Candidate Support Office Sought: Oppose President	House District:
Calendar Year-To-Date Per Election for Office Sought Other (s	Primary General
	lic Distribution/Dissemination
Mailing Address Amount	
City State Zip Code	
Purpose of Expenditure Category/ Type Date of Dist	oursement or Obligation
Name of Federal Candidate Support Office Sought: Oppose President	House District:
Calendar Year-To-Date Per Flection for Office Sought	Senate State: Primary General specify)
(a) SUBTOTAL of Itemized Independent Expenditures	6000
(b) SUBTOTAL of Uniternized Independent Expenditures	0000
(c) TOTAL Independent Expenditures	0000
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coopers with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reparty committee) any political party committee or its agent.	
Signature Date 04 12	2014

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(6) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

PAGE OF (2 U.S.C. §441a(d)) FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTEE (In Full) IRBAN PROGRESS POLITICAL ACTION COMMITTEE Full Name of Subordinate Committee Has your committee been designated to make coordinated expenditures by a political party committee? ☐ NO YES If YES, name the designating committee: Mailing Address City State ZIP Code Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date City State Zip Code Name of Federal Candidate Supported Office Sought: House State: **Amount** Senate District: **Presidential** Aggregate General Election Expenditure for this Candidate Full Name (Last, First, Middle Initial) of Each Payee Purpose of Expenditure Category/ Type Mailing Address Date City State Zip Code Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: **Presidential** Aggregate General Election Expenditure for this Candidate Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Type Mailing Address Date City State Zip Code Name of Federal Candidate Supported State: Office Sought: House Amount Senate District: Presidential Aggregate General Election Expenditure for this Candidate SUBTOTAL of Expenditures This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE H1 (FEC Form 3X)

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnented Committees Only)

NAME OF COMMITTEE (In Full)					
URBAN PROGRESS POLITICAL ACTION COMMITTEE					
USE ONLY ONE SECTION, A or B					
A. State and Local Party Committees					
Fixed Percentage (select one)					
Presidential-Only Election Year (28% Federal)					
Presidential and Senate Election Year (36% Federal)					
Senate-Only Election Year (21% Federal)					
Non-Presidential and Non-Senate Election Year (15% Federal)					
B. Separate Segregated Funds and Nonconnected Committees					
Flat Minimum Federal Percentage					
If the committee will allocate using the flat minimum percentage of 50% federal funds, check					
If the committee is spending more than 50% federal funds, indicate ratio below					
Federal %					
Nonfederal					
This ratio applies to (check all that apply):					
Administrative Generic Voter Drive Public Communications Referencing Party Only					

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS		PAGE OF			
NAME OF COMMITTEE (IN FUII) URBAN PROGRESS POLITICAL ACTION COMMITTEE					
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDA ACTIVITIES APPEARING ON THIS REPORT.	TE SUPPORT				
Methods of allocation:					
 FUNDRAISING activities are allocated using the "funds received meti expenses must equal the federal proportion of monies raised. 	nod." where the federal pro	pportion. of.			
II. Shared DIREC'T CANDIDATE SUPPORT activities are allocated accommon where the federal proportion of disbursements is based on the benefitivity. For PACs Only: Direct candidate support includes public common federal and nonfaderal candidates, regardless of whether there is a rare allocated using a time/space method.	t derived by federal candi nunications or voter drives	dates from the ac- that refer to both			
ACTIVITY OR EVENT IDENTIFIER					
ACTIVITY IO.	FEDERAL %	NONFEDERAL %			
ACTIVITY IS: Fundraising Direct Candidate Support	%	%			
CHECK IF THE RATIO IS:	(C.	Learning Land 10			
New Revised Same as Previously Reported					
ACTIVITY OR EVENT IDENTIFIER					
AOTIVITY IO.	FEDERAL %	NONFEDERAL %			
ACTIVITY IS: Fundraising Direct Candidate Support	%	%			
CHECK IF THE RATIO IS:	<u> </u>	<u></u>			
New Revised Same as Previously Reported	}				
ACTIVITY OR EVENT IDENTIFIER					
	FEDERAL %	NONFEDERAL %			
ACTIVITY IS:					
CHECK IF THE RATIO IS:	<u> </u>	%			
New Revised Same as Previously Reported					
ACTIVITY OR EVENT IDENTIFIER	EEDEDAL AV	NONEEDEDALA			
ACTIVITY IS:	FEDERAL %	NONFEDERAL %			
Fundraising Direct Candidate Support	%	%			
CHECK IF THE RATIO IS:		Annual Control of the			
New Revised Same as Previously Reported					
ACTIVITY OR EVENT IDENTIFIER	[-				
AOTHUT IO	FEDERAL %	NONFEDERAL %			
ACTIVITY IS: Fundraising Direct Candidate Support	%	%			
CHECK IF THE RATIO IS:	<u> </u>	<u> </u>			
New Revised Same as Previously Reported					
ACTIVITY OR EVENT IDENTIFIER					
AOTH MTV IO	FEDERAL %	NONFEDERAL %			
ACTIVITY IS: Fundraising Direct Candidate Support	9/	•			
CHECK IF THE RATIO IS:	<u></u> %	<u></u> %			
New Revised Same as Previously Reported	 .				

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE	•	С	F		
FOR	LINE	18a	OF	FORM	3>

	 	FOR LINE TO OF FORM 3X		
NAME OF COMMITTEE (In Full)				
URBAN PRESENTS POLITICAL ACTION COMMITTEE				
NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED		
	(A 2 A 2 A 2 A 2 A 2 A 2 A 2 A 2 A 2 A			
		الــــــــــــــــــــــــــــــــــــ		
BREAKDOWN OF TRANSFER RECEIVED				
i) Total Administrative				
1		السك والمسائد المسائد		
ii) Generic Voter Drive				
· ·				
iii) Exempt Activities				
iv). Direct Fundralsing (List Activity or Event Iden	ntifier).			
		7]		
a)				
, h)				
. b)				
c) Total Amount Transferred For Direct Fundra	ising			
		te beite (dam) absorberedit schami für editemberedit eranden som für ein erden pala schlauf zur diesel förfate Territoria		
v) Direct Candidate Support (List Activity or Ev				
a)	,			
		건 제		
b)				
1		المركبين المسترسمات علامة المسترسمات		
c) Total Amount Transferred For Direct Candid	ate Support			
vi) Public Communications Referring Only to I	South (Mada by PAC)			
VI) Public Communications Referring Only to I	Party (Made by PAC)			
TOTALS FO	R BREAKDOWN OF TRANSFER RECEIVE			
TOTAL This Period (Administrative)	\ <u>\</u>	0000		
, , , , , , , , , , , , , , , , , , , ,				
TOTAL This Period (Generic Voter Drive)	Lana			
TOTAL This Period (Exempt Activities)				
		6000		
TOTAL This Period (Direct Fundraising)	<u></u>			
TOTAL This Period (Direct Candidate Support)		0000		
The state of the s) Designation			
TOTAL This Period (Public Communications Referring	Only to Party)			
TOTAL This Period (Total Amount Transferred)				

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

FOR LINE	210 OF	EODM	2٧
PAGE	OF		

NA	ME OF COMMITTEE THE FULLY OF COMMITTEE THE FU	emmi TTE	
A.	Full Name (Last, First, Middle Initial)		Allocated Activity or Event:
	Mailing Address		Administrative Fundraisting Exempt
			Voter Drive Direct Candidate Support
	City State Zip Code		Public Comm (ref to party only) by PAC
-	Purpose of Disbursement:		Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:		
	·	Category/ Type	Date / Date / Yarayay
	FEDERAL SHARE + NONFEDERAL	SHARE	= TOTAL AMOUNT
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
3.	Full Name (Last, First, Middle Initial)	<del></del>	Allocated Activity or Event:
	<u></u>		Administrative Fundraising Exempt
	Mailing Address		Voter Drive Direct Candidate Support
	City State Zip Code		Public Comm (ref to party αnly) by PAC
-	Purpose of Disbursement:	Ţ	Allocated Activity or Event Year-To-Date
	Activity or Event Identifier:	Category/	Mrw) / Logo / / Yavaa
		Туре	Date
		<u> </u>	
	FEDERAL SHARE + NONFEDERAL	L SHARE	= TOTAL AMOUNT
		<u></u>	= TOTAL AMOUNT
<u>.</u>		L SHARE	= TOTAL AMOUNT
<b>C</b> .		L SHARE	= TOTAL AMOUNT
<b>c</b> .		L SHARE	TOTAL AMOUNT  Allocated Activity or Event:
<b>3.</b>	Full Name (Last, First, Middle Initial)	L SHARE	TOTAL AMOUNT  Allocated Activity or Event:  Administrative Fundraising Exempt
0.	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code	L SHARE	TOTAL AMOUNT  Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date
<b>.</b>	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:	L SHARE	TOTAL AMOUNT  Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date
	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code	L SHARE	TOTAL AMOUNT  Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date
<u>.</u>	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:	L SHARE	TOTAL AMOUNT  Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date
<b>3.</b>	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDERAL	Category/ Type	TOTAL AMOUNT  Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  Date TOTAL AMOUNT
<b>3.</b>	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:	Category/ Type	TOTAL AMOUNT  Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  Date
	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDERAL	Category/ Type	TOTAL AMOUNT  Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  Date TOTAL AMOUNT
	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDERAL	Category/ Type  SHARE	TOTAL AMOUNT  Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  TOTAL AMOUNT  TOTAL AMOUNT
su	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDERAL  BETOTAL of Allocated Federal and NonFederal Activity This Page  FEDERAL SHARE + NONFEDERAL	Category/ Type  SHARE	TOTAL AMOUNT  Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  TOTAL AMOUNT  TOTAL AMOUNT
su	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDERAL  BHOTAL of Allocated Federal and NonFederal Activity This Page  FEDERAL SHARE + NONFEDERAL  TAL This Period (last page for each line only)(Federal share to 21(a)(i) an	Category/ Type  SHARE  SHARE	TOTAL AMOUNT  Allocated Activity or Event:  Administrative Fundraising Exempt  Voter Drive Direct Candidate Support  Public Comm (ref to party only) by PAC  Allocated Activity or Event Year-To-Date  TOTAL AMOUNT  TOTAL AMOUNT
su	Full Name (Last, First, Middle Initial)  Mailing Address  City State Zip Code  Purpose of Disbursement:  Activity or Event Identifier:  FEDERAL SHARE + NONFEDERAL  BETOTAL of Allocated Federal and NonFederal Activity This Page  FEDERAL SHARE + NONFEDERAL	Category/ Type  SHARE  d NonFederal sh. SHARE	TOTAL AMOUNT    Allocated Activity or Event:   Administrative   Fundraising   Exempt     Voter Drive   Direct Candidate Support     Public Comm (ref to party only) by PAC     Allocated Activity or Event Year-To-Date     Date   TOTAL AMOUNT     TOTAL AMOUNT

### SCHEDULE H5 (FEC Form 3X)

## TRANSFERS OF LEVIN FUNDS RECEIVED FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, Bistrict and Local Party Committees Only)

to be used	by State, District and Loca	ar Party Committees Omy		FOR LINE 18b OF FORM 3X
	DMMITTEE (IN FUII) BAN PROGRESS PR	SLITICAL ACTION (	DUNITTE	·
NAME OF	ACCOUNT	DATE OF RECEIPT		OUNT TRANSFERRED
			boom on the second	
	OWN OF THIS TRANSFER	VOTE	R REGISTRATION	
"	Voter Registration  Total Amount Transferred for Vote	11		
		( <u></u>	VOTER ID	
ii	Voter ID Total Amount Transferred for Vote	r ID		
		Harman Land	GOTV.	<u></u>
ii ii	<ul> <li>i) GOTV</li> <li>Total Amount Transferred for GOT</li> </ul>	~	المستراسية المستود عربيدا بالمسترد	
	Total Amount Transletted for Got		GENERIC CAM	PAIGN ACTIVITY
iv	Generic Campaign Activity     Testel Amount Transferred for Con-	orla. Campaign Activity	J	
	total Amount Translettic for Gen	erlc Campaign Activity		
NAME OF	ACCOUNT	DATE OF RECEIPT	TOTAL AMO	OUNT TRANSFERRED
		M.C.W.) \ LO.C.D.\ \LA.C.A.		
	· · · · · · · · · · · · · · · · · · ·			
BREAKDO	OWN OF THIS TRANSFER			
iy	Voter Registration		R REGISTRATION	
	Total Amount Transferred for Vote	er Registration		•
ı	) Voter ID		VOTER ID	
	Total Amount Transferred for Vote	r ID	<u> </u>	
li	i). GOTV		GOTV	
	Total Amount Transferred for GOT	rv		
ì	v) Generic Campaign Activity		GENERIC CAM	IPAIGN ACTIVITY
	Total Amount Transferred for Gen	eric Campaign Activity	······································	
:	TOTALS FOR BI	REAKDOWN OF TRANSFER REC	CEIVED (Last Page Only)	
TOT	AL This Period (Voter Registration)			
	ALL THIS FOREX (VOICE MOGISTRAION).			
тот	AL This Period (Voter ID)			20
тот	AL This Period (GOTV)			3 <u>0</u> 00
тот	AL This Period (Generic Campaign	Activity)		,0000
тот	AL This Period (Total Amount of Tra	insfers Received)		00,00

PAGE

OF

# SCHEDULE H6 (FEC Form 3X) DISBURSEMENTS OF FEDERAL AND LEVIN FUNDS FOR ALLOCATED FEDERAL ELECTION ACTIVITY

(To be used by State, District and Local Party Committees Only)

FOR L	INE	30a	OF	FORM	ЗХ
PAGE			O۴		

AME OF COMMITTEE (In Full)			
URBAN PROGRESS POLITICAL ACTION COMMITTEE			
A. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:  Voter Registration GOTV  Voter ID Generic Campaign		
Mailing Address	Allocated Activity or Event Year-To-Date		
City State Zip Code			
Purpose of Disbursement C	ategory/ Type Date		
FEDERAL SHARE + LEVIN SHARE	= TOTAL AMOUNT		
B. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:  Voter Registration GOTV		
	Voter ID Generic Campaign		
Mailing Address	Allocated Activity or Event Year-To-Date		
City State Zip Code			
	ategory/- Type Date		
FEDERAL SHARE + LEVIN SHARE	TOTAL AMOUNT		
C. Full Name (Last, First, Middle Initial) / Full Organization Name	Type of Allocated Activity or Event:  Voter Registration GOTV  Voter ID Generic Campaign		
Mailing Address	Allocated Activity or Event Year-To-Date		
City State Zip Code			
Ony State Zip Gode .			
Purpose of Disbursement C	ategory/ Type Date		
FEDERAL SHARE + LEVIN SHARE	= TOTAL AMOUNT		
SUBTOTAL of Shared Federal and Levin Activity This Page			
FEDERAL SHARE + LEVIN SHARE	TOTAL AMOUNT		
FOTAL This Period (last page for each line only)(Federal share to 30(a)(i) and Lev FEDERAL SHARE	in share to 30(a)(ii)) TOTAL AMOUNT		
LEDEUAL SHAVE	TOTAL AMOUNT		
LEVIN SHARE و حادث من المعلى المراجعة			
FOTAL This Period for the Levin Share			

### SCHEDULE L (FEC Form 3X)

**AGGREGATION PAGE: LEVIN FUNDS** 

NAM	NAME OF COMMITTEE (IN FUIL) URBAN PROGRESS POLITICAL ACTION COMMITTEE				
NAM	E OF ACCOUNT				
<b></b>		COLUMN A TOTAL THIS PERIOD	COLUMN B YEAR-TO-DATE		
1.	RECEIPTS FROM PERSONS (a) Itemized(Use Schedule L-A)		000		
	(b) Unitemized		0000		
	(c)· Total·	00.00			
2:	OTHER RECEIPTS				
3.	TOTAL RECEIPTS		0000		
4.	TRANSFERS TO FEDERAL OR ALLOCATION ACCOUNT (Use Schedule L-B)		······································		
	(a) Voter Registration		00.00		
	(b) Voter ID				
	(c) GOTV		0000		
	(d) Generic Campaign				
	(e) Total				
5.	OTHER DISBURSEMENTS		0000		
6. 	TOTAL DISBURSEMENTS(Add Lines 4e and 5)		0000		
7.	BEGINNING CASH ON HAND(for Column B, use cash as of January 1st)				
8.	RECEIPTS(from Line 3)		0000		
9.	SUBTOTAL(Add Lines 7 and 8)				
10.	DISBURSEMENTS(From Line-8)-				
11.	ENDING CASH ON HAND(Subtract Line 10 From Line 9)	0000			

## SCHEDULE L-A (FEC Form 3X)

Use separate schedule(s)

	PAGE	OF
LINE NUMBER: ck only one)	1a	2

ITEMIZED RECEIPTS OF LEVIN FUNDS for each category of the Aggregation Page		FOR LINE NUMBER: (check only one) 12	
Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and			
NAME OF COMMITTEE (In Full)  URBAN PROGRESS POLIT	TICH	e Action C	
Full Name (Last, First, Middle Initial) / Full Organization N.A.	ame		Date of Receipt
Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	
Name of Employer or Principal Place of Business			Aggregate Year-to-Date
Occupation			
Full Name (Last, First, Middle Initial) / Full Organization NB.	lame		Date of Receipt
Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	
Name of Employer or Principal Place of Business  Occupation			Aggregate Year-to-Date
	amc		Deter of Reserve
Full Name (Last, First, Middle Initial) / Full Organization N  C.  Mailing Address	.a.nc		Date of Receipt  [MCM] / [0] / [CONTON OF THE PROPERTY   PROPERTY
City	State	Zip Code	Amount of Each Receipt this Period
Name of Employer or Principal Place of Business	<del></del>		Aggregate Year-to-Date
Occupation	<del></del>		Aggregate Year-to-Date
Full Name (Last, First, Middle Initial) / Full Organization ND.	lame		Date of Receipt
Mailing Address			Amount of Each Pensist this Paried
City	State	Zip Code	Amount of Each Receipt this Period
Name of Employer or Principal Place of Business			Aggregate Year-to-Date
Occupation			
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	
TOTAL This Period (last page this line number only)			00,00

## SCHEDULE L-B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)

FOR LINE NUMBER:	PAGE	OF
(check only one)	4a	5

OF LEVIN FUNDS  Aggregation Page		4a 4c 5 4b 4d			
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full)	•				
URBAN PROGRESS POLITICA	4L ACTION C	emmi (TE			
Full Name (Last, First, Middle Initial) / Full Organization Name	1	Date of Disbursement			
<del>-</del>	<u>.                                    </u>	MUMI / TOVOT / YVVYTYTY			
Mailing Address					
City State	Zip Code	Amount of Each Disbursement this Period			
Purpose of Disbursement					
Full Name (Last, First, Middle Initial) / Full Organization Name		Day of Dilling			
o.		Date of Disbursement			
Mailing Address		MOW O O O			
City State	Zip Code	Amount of Each Disbursement this Period			
Purpose of Disbursement					
Full Name (Last, First, Middle Initial) / Full Organization Name		_			
<b>.</b>		Date of Disbursement			
Mailing Address		M / D / / Y Y Y			
City State	Zip Code	Amount of Each Disbursement this Period			
Purpose of Disbursement					
Full Name (Last, First, Middle Initial) / Full Organization Name					
D		Date of Disbursement			
Mailing Address		M M / D O / Y V V V			
City State	Zip Code	Amount of Each Disbursement this Period			
Purpose of Disbursement					
Full Name (Last, First, Middle Initial) / Full Organization Name					
. an ramo (Last, 1113), whole thinay / full Organization Name		Date of Disbursement			
Mailing Address		M · M / D · D / V · Y · Y · Y			
City State	Zip Code	Amount of Each Disbursement this Period			
Purpose of Disbursement					
SUBTOTAL of Disbursements This Page (optional)		, 0000			
TOTAL This Period (last page this line number only)		0000			

Urban Progress PAC P.O. Box 257 Walterboro, SC 29488 RECEIVED

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Federal Election Commission 999 E Street, NW

Washington, DC 20463

Form 3x

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Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked 4/12-14
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USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busin	ess Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	f Receipt or Postmarked
PREPARER	4/24/14 DATE PREPARED

(8/2013)